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JUDGMENT IN THE D		Form #1 DC34
	DISTRICT COURT OF THE FIRST CIRCUIT HONOLULU DIVISION STATE OF HAWAI'I	FIRST OFFICE
Plaintiff(s)		CIVIL DIVISION
	HEALTH ALLIANCE	JUN 3 2 23 PM '03 FILED UTP ISSUED RETURNED
		Civil No. 1RC03-1-252
Defendant(s) ALOHA SPORT	TS, INC.	Filing Party(ies)/Filing Party(ies)' Attorney (Name, Attorney Number, Firm Name (if applicable), Address, Telephone and Facsimile Numbers)  DOUISE K. Y. ING #2394-0 PAUL M. IGUCHI #6047-0 Alston Hunt Floyd & Ing 18th Floor, ASB Tower, 1001 Bishop Street Honolulu, Hawaii 96813 Tel: 524-1800 Fax: 524-4591
Last Court Date:	: March 17, 2003	
cation of Pla	The Defendant(s) having fail to plead or otherwise aintiff(s) and on the verification that Defendant(s)  ED/DISMISSED AS TO: (LIST DEFENDAN  ed on	
	1	JUDGMENT
Dringing		
Interest . Attorney' Costs of 0 Sheriff's I Sheriff's I	Amount 's Fees  Court  Fees  Mileage  sts	\$1.685.72 421.43 100.00 - 25.00 - 20.00 -
Interest . Attorney' Costs of ( Sheriff's I Sheriff's I Other Cos	's Fees	\$1,685.72 421.43 100.00 - 25.00 - 20.00 -
Interest . Attorney' Costs of ( Sheriff's I Sheriff's I Other Cos Total Jud	S Fees Court Fees Mileage sts  Gment Amount  Clerk  Judg	\$1,685.72  421.43  100.00  25.00  20.00  \$2,252.15
Interest . Attorney' Costs of ( Sheriff's I Sheriff's I Other Cos Total Jud  Date: In accordance v District Court A	S Fees Court Fees Mileage sts  gment Amount  Clerk  Judg	\$1,685.72  421.43  100.00  25.00  20.00  \$2,252.15  ge of the above-entitled Court  Fyou require an accommodation for your disability, please contact the contact
Interest . Attorney' Costs of ( Sheriff's I Sheriff's I Other Cos Total Jud  Date: In accordance v District Court A in advance of y Default En	S Fees Court Fees Mileage sts  Gment Amount  Clerk  Judg  With the Americans with Disabilities Act if  Administration Office at PHONE NO. 538-	\$1,685.72  421.43  100.00  25.00  20.00  \$2,252.15  Eyou require an accommodation for your disability, please contact the 5121, FAX 538-5233, or TTY 539-4853 at least ten (10) working days il related matters, please call 538-5151.
Interest . Attorney' Costs of ( Sheriff's I Sheriff's I Other Cos Total Jud  Date: In accordance v District Court A in advance of y Default En	S Fees Court Fees Mileage sts  Igment Amount  Clerk  Judg with the Americans with Disabilities Act if Administration Office at PHONE NO. 538- your hearing or appointment date. For Civintered Against the Above-named Defendant(s)	## S1.685.72  ## S1.685.72  ## A21.43  ## 100.00  ## 25.00  ## 20.00  ## S2,252.15  ##